P1600050206

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SCICKETARY OF STATE THE STATE OF CORPORATION OF CORPORATION

JUL 19 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: ELOHIM A OMEO	GA PAINTING, INC	
DOCUMENT NUMBER:			
The enclosed Articles of An		bmitted for filing.	
Please return all corresponde	ence concerning this mat	tter to the following:	
MAR	LET OSTOS		
		Name of Contact Person	1
SUCC	CESS BUSINESS SOLU	JTION	
	-	Firm/ Company	·
2751	S. CHICKASAW TRA	IL STE 106	
		Address	
ORL	ANDO, FL 32829		
		City/ State and Zip Code	
MOSTOS@	MARIETOSTOS.COM	1	
	E-mail address: (to be us	ed for future annual report	notification)
For further information cond	erning this matter, pleas	se call:	• •
MARIET OSTOS		at (407	745-4684
Name of Cor	ntact Person		de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	rtment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Division o P.O. Box	ent Section of Corporations	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment to Articles of Incorporation of



ELOHIM A OMEGA PAINTING, INC

2016 JUL 11 PM 2:57

(<u>Name</u>	of Corporation as curre	ently filed with the Florida Dept. of State)
P16000050206		
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, th	his Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
N/A		. The new
	nation "Corp," "Inc," of	ntion," "company," or "incorporated" or the abbreviation r "Co". A professional corporation name must contain the
B. Enter new principal office address,	if annlicable:	N/A
(Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent ar	ıd/or registered office ac	ddress in Florida, enter the name of the
new registered agent and/or the ne		
Name of New Registered Agent	SUCCESS BUSINESS	SOLUTION, INC
	2751 S. CHICKASAW	TRAIL STE 106
	. (Florida	street address)
	ORLANDO	37870
New Registered Office Address:		(City) , Florida (Zip Code)
		(Oily)
New Registered Agent's Signature, if o	hanging Registered Age	ent:
I hereby accept the appointment as regis	tered agent. I am familio	ar with and accept the obligations of the position.
	4 DOP	
	Tignatura of Nan	w Registered Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	MAGR	WILLIAM F. HERNANDEZ MEJIA	5626 STONERIDGE CIR
Add			ORLANDO, FL 32839
X Remove			`
2) Change	TRES	EVER B. HERNANDEZ МЕЛА	5626 STONERIDGE CIR
Add		* <a< td=""><td>ORLANDO, FL 32839</td></a<>	ORLANDO, FL 32839
X Remove			
3) Change		-	
Add			
Remove			
4) Change			
Add			
Remove			Þ
5) Change			
Add			
Remove			
6) Change			
Add	•		
Remove			
kemove			

Α '	<mark>ing or adding addi</mark> t Iditional sheets, if no	ecessary). (Be s	pecific)			
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f an ame	endment provides <u>f</u>	for an exchange,	reclassificatio	n, or cancellatio	n of issued shar	es.
provisio	ons for implementin	ng the amendmen	t if not contai	ned in the amen	dment itself:	_
(if n	ot applicable, indica	ate N/A)				
(9 "						
						
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* * *	07/08/2016	
he date of each amendment(s) adop		, if other than
ite this document was signed.		FILED
fective date if applicable:		SECRETARY OF STATE DIVISION OF CORFORATION.
	(no more than 90 days after amendment file date)	2016 JUL 1 1 PM 2: 57
te: If the date inserted in this bloc cument's effective date on the Depar	k does not meet the applicable statutory filing requirements, tment of State's records.	this date will not be listed as
option of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte by the shareholders was/were suffice	ed by the shareholders. The number of votes cast for the amen cient for approval.	dment(s)
	ved by the shareholders through voting groups. The following ch voting group entitled to vote separately on the amendment	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	ed by the board of directors without shareholder action and shareholder action act	
•		
07/08/2016 Dated • A		
	Comp	
Signature	The second secon	
(By a direc	ctor, president or other officer - if directors or officers have no	
	by an incorporator – if in the hands of a receiver, trustee, or other	ier court
appointed	fiduciary by that fiduciary)	
	Jerson Hernandez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	